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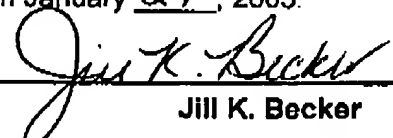
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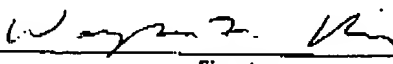
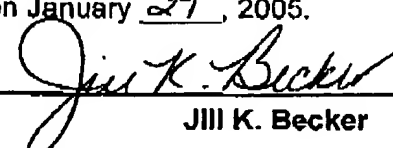
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Date: January 27, 2006
From: Wayne F. Reinke (e-mail: WFR@hrfmlaw.com)
No. of Pages: 11 (Including this Page)
Fax No.: 571-273-8300
To: Examiner Carl G. Colin
Group Art Unit 2136
U.S. Patent and Trademark Office
Alexandria, VA 22313-1450
Re: U.S. Patent Application Serial No.: 09/731,509
Applicant(s): Schaeck et al.
Attorney Docket No.: DE919990082
Message: Please find attached hereto the following documents:
1. Amendment Transmittal Letter (1 page) (in duplicate); and
2. Response to Final Office Action (8 pages).

WFR:jb
Attachments

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. DE919990082	
Applicant(s): Schaeck et al.						
Application No. 09/731,509	Filing Date 12/07/2000	Examiner Colin, Carl G.	Customer No. 46369	Group Art Unit 2136	Confirmation No. 1249	
Invention: CONDITIONAL SUPPRESSION OF CARD HOLDER VERIFICATION						
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					JAN 27 2006	
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	32 -	32 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ In the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0463 (IBM) <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.18. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: January 27, 2006			
Wayne F. Reinke, Esq. Reg. No. 36,650 Heslin Rothenberg Farley & Mesiti P.C. 5 Columbia Circle Albany, NY 12203 Telephone: (518) 452-5600 Facsimile: (518) 452-5579			I hereby certify that this correspondence is being transmitted by facsimile transmission to: Examiner Carl G. Colin, Group Art Unit 2136, United States Patent and Trademark Office, Alexandria, VA 22313-1450, Facsimile No. 571-273-8300, on January <u>27</u> , 2005.  Jill K. Becker			
cc:						

P111LARGE/REV08

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. DE919990082	
Applicant(s): Schneck et al.						
Application No. 09/731,509	Filing Date 12/07/2000	Examiner Colla, Carl G.	Customer No. 46369	Group Art Unit 2136	Confirmation No. 1249	
Invention: CONDITIONAL SUPPRESSION OF CARD HOLDER VERIFICATION						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	32 -	32 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0463 (IBM) <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
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Wayne F. Reinke, Esq. Reg. No. 36,650 Heslin Rothenberg Farley & Mesiti P.C. 5 Columbia Circle Albany, NY 12203 Telephone: (518) 452-5600 Facsimile: (518) 452-5579			I hereby certify that this correspondence is being transmitted by facsimile transmission to: Examiner Carl G. Colin, Group Art Unit 2136, United States Patent and Trademark Office, Alexandria, VA 22313-1450, Facsimile No. 571-273-8300, on January <u>27</u> , 2005.  Jill K. Becker			
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RESPONSE UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2136

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DE919990082

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Schaeck et al. Confirmation No.: 1249
Serial No.: 09/731,509 Group Art Unit: 2136
Filed: 12/07/2000 Examiner: Colin, Carl G.
Title: CONDITIONAL SUPPRESSION OF CARD HOLDER VERIFICATION

CERTIFICATE OF FACSIMILE TRANSMISSION

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Jill K. Becker

Date of Signature: January 27, 2006.

To: Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO FINAL OFFICE ACTION

Dear Sir:

In response to a final Office Action with a mailing date of December 6, 2005, response to which is due by March 6, 2006 without extension, and which is being filed within two months of the final Office Action mailing date, kindly consider the following remarks.